SENDER: COMPLETE THIS SECTION Selecto items 1, 2, and 3. Also complete	A. Signature Agent A. Signature C. Dyne of Delivery
item 4 if Restricted Delivery is desired: item 4 if Restricted Delivery is desired: Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	B Received by Printed Name) C. Date of Plantery D. Is delivery address different from item 17
Regions Bank Main Branch 8 Commerce Street Montgomery, AL 36104	3. Service Type Certified Mail Express Mail Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7005 (Transfer from service label) Domestic	4. Restricted Delivery